Love Brooke

Love Brooke

Brooke Elizabeth LOVE

BIRTH 10 APR 1976 • Columbus, Franklin, Ohio, USA
DEATH Living
daughter

Facts

Age 0 — **Birth**
10 Apr 1976 • Columbus, Franklin, Ohio, USA

Residence
Bet. 1935-1993 • Dublin, OH

Baptism
09 May 1976 • Grace Evaangical Lutheran Church Columbus, Franklin, Ohio, USA

Baptism
09 May 1976 • Columbus, Franklin, Ohio, USA
Grace Evangelical Lutheran Church

Family

Parents

Gary Lewis LOVE 1947–

Rita Belle BROWN 1947–

Spouse

Sources

Ancestry Sources

U.S. Public Records Index, 1950-1993, Volume 2

ancestry

Back

OHIO DEPARTMENT OF HEALTH
DIVISION OF VITAL STATISTICS
CERTIFICATE OF LIVE BIRTH

Reg. Dist. No. 23 Primary Reg. Dist. No. 0207

Registrar's No. 4232

Birth No. 134 - 76-037128

1. CHILD—NAME: First: Brooke; Middle: Elizabeth; Last: LOVE			2a. DATE OF BIRTH (Month, Day, Year): April 5, 1976	2b. HOUR: 8:50A M.
3. SEX: female	4a. THIS BIRTH —Single, twin, triplet, etc. (Specify): single	4b. IF NOT SINGLE BIRTH —Born first, second, third, etc. (Specify): ---	5a. COUNTY OF BIRTH: Franklin	
5b. CITY, VILLAGE, OR LOCATION OF BIRTH: Columbus	5c. INSIDE CITY LIMITS (Specify yes or no): yes	5d. HOSPITAL—NAME (If not in hospital, give street and number): St. Ann's Hospital		
6. MOTHER—MAIDEN NAME: First: Rita; Middle: Belle; Last: Brown			6b. AGE (At time of this birth): 28	6c. STATE OF BIRTH (If not in U.S.A., name country): Ohio
7a. RESIDENCE—STATE: Ohio	7b. COUNTY: Licking	7c. CITY, VILLAGE, OR LOCATION: Pataskala	7d. INSIDE CITY LIMITS (Specify yes or no): yes	7e. STREET AND NUMBER: Rt. 3, York Road
8. FATHER—NAME: First: Gary; Middle: Lewis; Last: Love			8b. AGE (At time of this birth): 29	8c. STATE OF BIRTH (If not in U.S.A., name country): Ohio
9a. INFORMANT'S NAME OR SIGNATURE: Rita Love				9b. RELATION TO CHILD: Mother
I certify that the above named child was born alive at the place and time and on the date stated above. 10a. SIGNATURE: Harley M. Blank M.D.			10b. DATE SIGNED: 4/5/76	10c. ATTENDANT—M.D., D.O., midwife, other (specify): M.D.
10d. CERTIFIER—NAME (Type or Print): Harley M. Blank, M.D.			10e. MAILING ADDRESS (Street or R.F.D. No., City or Village, State, Zip): 5180 E. Main St., Reyn. Ohio 43068	
11a. REGISTRAR—SIGNATURE: Blanche D. Foster				11b. DATE RECEIVED BY LOCAL REGISTRAR: APR 23 1976

DETAILS

Individual Report for Brooke Elizabeth Love

Individual Summary: **Brooke Elizabeth Love**

Sex: Female

Father: Gary Lewis Love

Mother: Rita Belle Brown

Individual Facts:

Birth: 05 Apr 1976 in Columbus, OH

Baptism: 09 May 1976 in Grace Evangical Lutheran Church - Columbus, OH

Social Security Number: 278-74-4815

Shared Facts: **[no spouse]**

[no facts]

Children [no children]

Notes:

Person Notes: [no notes]

Sources:

1 [no sources]

OHIO DEPARTMENT OF HEALTH
DIVISION OF VITAL STATISTICS
CERTIFICATE OF LIVE BIRTH

Reg. Dist. No. 07 Registrar's No. 4232

Primary Reg. Dist. No. 0707

Birth No. 184 - 76-037128

CHILD—NAME (First, Middle, Last)	DATE OF BIRTH (Month, Day, Year)	HOUR
Brooke Elizabeth LOVE	2a. April 5, 1976	2b. 8:50 AM

SEX	THIS BIRTH —Single, twin, triplet, etc. (Specify)	IF NOT SINGLE BIRTH —Born first, second, third, etc. (Specify)	COUNTY OF BIRTH
female	4a. single	4b. ---	5a. Franklin

CITY, VILLAGE, OR LOCATION OF BIRTH	INSIDE CITY LIMITS (Specify yes or no)	HOSPITAL—NAME (If not in hospital, give street and number)
Columbus	5c. yes	5d. St. Ann's Hospital

MOTHER—MAIDEN NAME (First, Middle, Last)	AGE (At time of this birth)	STATE OF BIRTH (If not in U.S.A., name country)
Rita Belle Brown	6b. 28	6c. Ohio

RESIDENCE—STATE	COUNTY	CITY, VILLAGE, OR LOCATION	INSIDE CITY LIMITS (Specify yes or no)	STREET AND NUMBER
Ohio	7b. Licking	7c. Pataskala	7d. yes	7e. Rt. 3, York Road

FATHER—NAME (First, Middle, Last)	AGE (At time of this birth)	STATE OF BIRTH (If not in U.S.A., name country)
Gary Lewis Love	8b. 29	8c. Ohio

INFORMANT'S NAME OR SIGNATURE	RELATION TO CHILD
Rita Love	9b. Mother

I certify that the above named child was born alive at the place and time and on the date stated above.	DATE SIGNED	ATTENDANT—M.D., D.O., midwife, other (specify)
SIGNATURE Harley M. Blank M.D.	10b. 4/5/76	10c. M.D.

CERTIFIER—NAME (Type or Print)	MAILING ADDRESS (Street or R.F.D. No., City or Village, State, Zip)
Harley M. Blank, M.D.	10e. 5180 E. Main St., Reyn. Ohio 43068

REGISTRAR—SIGNATURE	DATE RECEIVED BY LOCAL REGISTRAR
Blanche D. Foster	11b. APR 23 1976

OHIO DEPARTMENT OF HEALTH
DIVISION OF VITAL STATISTICS
CERTIFICATE OF LIVE BIRTH

Reg. Dist. No. 04
Primary Reg. Dist. No. 0401

Registrar's No. 4232

Birth No. 134 - 76-037128

1. CHILD—NAME (First, Middle, Last): Brooke Elizabeth LOVE		DATE OF BIRTH (Month, Day, Year) 2a. April 5, 1976	HOUR 2b. 8:50A M.
SEX: female	THIS BIRTH —Single, twin, triplet, etc. (Specify) 4a. single	IF NOT SINGLE BIRTH —Born first, second, third, etc. (Specify) 4b. ---	COUNTY OF BIRTH 5a. Franklin
CITY, VILLAGE, OR LOCATION OF BIRTH: 5. Columbus	INSIDE CITY LIMITS (Specify yes or no) 5c. yes	HOSPITAL—NAME (If not in hospital, give street and number) 5d. St. Ann's Hospital	
6. MOTHER—MAIDEN NAME (First, Middle, Last): Rita Belle Brown		AGE (At time of this birth) 6b. 28	STATE OF BIRTH (If not in U.S.A., name country) 6c. Ohio
RESIDENCE—STATE 7a. Ohio	COUNTY 7b. Licking	CITY, VILLAGE, OR LOCATION 7c. Pataskala	INSIDE CITY LIMITS (Specify yes or no) 7d. yes
			STREET AND NUMBER 7e. Rt. 3, York Road
8. FATHER—NAME (First, Middle, Last): Gary Lewis Love		AGE (At time of this birth) 8b. 29	STATE OF BIRTH (If not in U.S.A., name country) 8c. Ohio
INFORMANT'S NAME OR SIGNATURE 9a. Rita Love			RELATION TO CHILD 9b. Mother
I certify that the above named child was born alive at the place and time and on the date stated above. 10a. SIGNATURE Harley M. Blank M.D.		DATE SIGNED 10b. 4/5/76	ATTENDANT—M.D., D.O., midwife, other (specify) 10c. M.D.
CERTIFIER—NAME (Type or Print) 10d. Harley M. Blank, M.D.		MAILING ADDRESS (Street or R.F.D. No., City or Village, State, Zip) 10e. 5180 E. Main St., Reyn. Ohio 43068	
REGISTRAR—SIGNATURE 11a. Blanche S. Foster			DATE RECEIVED BY LOCAL REGISTRAR 11b. APR 23 1976

I HEREBY CERTIFY THAT THIS CERTIFICATE IS AN EXACT COPY OF THE ORIGINAL CERTIFICATE WHICH IS REGISTERED AND PRESERVED IN THE BUREAU OF VITAL STATISTICS OF THE OHIO DEPARTMENT OF HEALTH. ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE.

I HEREBY CERTIFY THAT THIS CERTIFICATE IS AN EXACT COPY OF THE ORIGINAL CERTIFICATE WHICH IS REGISTERED AND PRESERVED IN THE DIVISION OF VITAL STATISTICS OF THE STATE DEPARTMENT OF HEALTH IN COLUMBUS, OHIO AND IS A PART OF THE PERMANENT RECORDS.

OHIO DEPARTMENT OF HEALTH
DIVISION OF VITAL STATISTICS
CERTIFICATE OF LIVE BIRTH

Reg. Dist. No. 03 Primary Reg. Dist. No. 0303

Registrar's No. 4232

Birth No. 134 - 76-037128

CHILD—NAME (1.) First: Brooke Middle: Elizabeth Last: LOVE			DATE OF BIRTH (Month, Day, Year) 2a. April 5, 1976	HOUR 2b. 8:50A M.
SEX: female	THIS BIRTH —Single, twin, triplet, etc. (Specify) 4a. single	IF NOT SINGLE BIRTH —Born first, second, third, etc. (Specify) 4b. ---	COUNTY OF BIRTH 5a. Franklin	
CITY, VILLAGE, OR LOCATION OF BIRTH 5b. Columbus	INSIDE CITY LIMITS (Specify yes or no) 5c. yes	HOSPITAL—NAME (If not in hospital, give street and number) 5d. St. Ann's Hospital		
MOTHER—MAIDEN NAME 6a. First: Rita Middle: Belle Last: Brown			AGE (At time of this birth) 6b. 28	STATE OF BIRTH (If not in U.S.A., name country) 6c. Ohio
RESIDENCE—STATE 7a. Ohio	COUNTY 7b. Licking	CITY, VILLAGE, OR LOCATION 7c. Pataskala	INSIDE CITY LIMITS (Specify yes or no) 7d. yes	STREET AND NUMBER 7e. Rt. 3, York Road
FATHER—NAME 8a. First: Gary Middle: Lewis Last: Love			AGE (At time of this birth) 8b. 29	STATE OF BIRTH (If not in U.S.A., name country) 8c. Ohio
INFORMANT'S NAME OR SIGNATURE 9a. Rita Love				RELATION TO CHILD 9b. Mother
I certify that the above named child was born alive at the place and time and on the date stated above. 10a. SIGNATURE [illegible]			DATE SIGNED 10b. 4/5/76	ATTENDANT—M.D., D.O., midwife, other (specify) 10c. M.D.
CERTIFIER—NAME (Type or Print) 10d. Harley M. Blank, M.D.			MAILING ADDRESS (Street or R.F.D. No., City or Village, State, Zip) 10e. 5180 E. Main St., Reyn. Ohio 43068	
REGISTRAR—SIGNATURE 11a. Blanche D. Foster				DATE RECEIVED BY LOCAL REGISTRAR 11b. APR 23 1976

Love Deidre

Love Deidre

with Moose and Rascal

with wagon

at the park with Mom

Grandma Winegardner and Deidre

olan mills

Individual Report for Deidre Anne Love

Individual Summary: **Deidre Anne Love**

Sex: Female

Father: Gary Lewis Love
Mother: Rita Belle Brown

Individual Facts:

Birth: 02 Jul 1971 in Columbus, OH
Baptism: 10 Sep 1971 in Lutheran Church - Thornville, OH
Graduation: 1989 in Mariner High School Cape Coral, FL
Social Security Number: 278-74-4774
Phone Number: 278-74-4774
Address: 346 Olentangy Meadows Drive / Lewis Center, OH 43035 / USA

Shared Facts: **Scott Misch**

Marriage: 21 Oct 1989 in Sanibel Island, FL[1]
Children: Michael Lewis Monroe Misch
Abigail Kaye Misch

Notes:

Person Notes: [no notes]

Sources:

1 mother, Married on the beach.

Deidre Anne Love 6 mos. in dress crocheted by her Grandmother Cora Belle Winegardner

ancestry

Children (1)

Michael Monroe Misch B:

Deidre Anne Misch

B: 02 Jul 1972 in Columbus, OH
D:

Scott Czar Misch **B:** 19 Sep 1963 in Michigan, USA

Other spouses (1)

Parents

Gary Lewis Love 1947-

Rita Belle Brown 1947-

Florida Marriage Indexes, 1822-1875 and 1927-2001

Does the Deidre Anne Love in this record match the person in your tree?

YES NO MAYBE

Saved to Love, Deidre Anne in tree "Ern Ellis Brown and Cora Belle Copley_2014-01-12" Remove

No Image
Text-only collection

Order Original Marriage Record

Add alternate information

Report issue

Name:	Deidre Anne Love
Spouse:	Scott Monroe Misch
County of Marriage:	Lee
Marriage Date:	21 Oct 1989
Gender:	Female
Race:	White
Volume:	7054
Certificate:	104776
Source:	Florida Department of Health

Does the Deidre Anne Love in this record match the person in your tree?

YES NO MAYBE

Suggested Records

U.S. Public Records Index, 1950-1993, Volume 1
Deidre Misch

Write a comment.

Make a Connection

Find others who are researching Deidre Anne Love in Public Member Trees

Source Information

Ancestry.com. *Florida Marriage Indexes, 1822-1875 and 1927-2001* [database on-line]. Provo, UT, USA: Ancestry.com Operations Inc, 2006.

Original data:

- Florida Department of Health. *Florida Marriage Index, 1927-2001.* Florida Department of Health, Jacksonville, Florida.
- Marriages records from various counties located in county courthouses and/or on microfilm at the Family History Library.

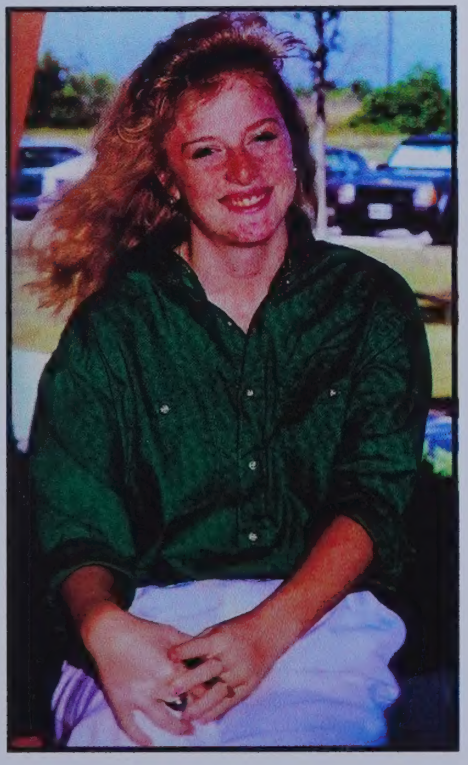
Description

1988-89
Captain's Table

Seated left to right : Angie Roles, Hayley Byrd, Deidre Love, Kim Phillips, Shelly Prashad
Standing left to right: Dave Pugliese, Mr. Michal McNerney, Dan Dalessandro, Kristi Parker

....Respected, Privileged, and Honored are the words that describe seniors chosen for Mariner High School's Caprain's Table.On most ships, an elite group of guests are chosen to dine with the captain of the ship. This is commonly known as the 'Captain's Table.' These students were a select few who have proven that they are definite assets to M.H.S.

Members of the Captain's Table, must first be nominated by at least five teachers. The selection is then narrowed to twenty students. Each student must then meet the following requirements a minimum 2.5 grade point average, participation in one or more extracurricular activities , excellent attendance, and recognition by teachers and students as school leaders.



DEIDRE LOVE

"I believe that in order to achieve success, not only in the world, but also as a person, you need to be honest, and to take responsibility for yourself and for your own actions."

By following her own philosophy of life, Deidre Love has defined the word "success" throughout her high school years and is ensured of the same in her career.

Involvement has been a key factor and way of life for Deidre, who has been involved with our swim team, SADD, Spirit Club, FBLA, National Forensic League, and held leadership positions such as the Managing Editor of the Navigator, Class Coordinator in her Junior Year, and Vice-President of the national Honor Society. With all of this consuming her spare time, Deidre still managed to maintain a 3.62 average.

Her fondest high school memory was the first moment she stepped inside the gym for Mariner's first Prom. "It was really fantastic when I saw how all the hard work paid off. It was gorgeous!"

In the fall, she hopes to attend Stetson University and major in secondary education, and then continue on to law school. With Deidre's past track record set here at Mariner, which earned her a position on the prestigious Captain's Table, there is no goal that Deidre can not achieve!

OHIO DEPARTMENT OF HEALTH
DIVISION OF VITAL STATISTICS
CERTIFICATE OF LIVE BIRTH

Reg. Dist. No. _____ Primary Reg. Dist. No. _____

Registrar's No. _____

Birth No. 134 - 71 - 123045

CHILD—NAME (1.) First: Deidre	Middle: Anne	Last: LOVE	DATE OF BIRTH (Month, Day, Year) (2a.) July 2, 1971	HOUR (2b.) 2:18 P.M.
SEX (3.) female	THIS BIRTH —Single, twin, triplet, etc. (Specify) (4a.) single	IF NOT SINGLE BIRTH —Born first, second, third, etc. (Specify) (4b.) —	COUNTY OF BIRTH (5a.) Franklin	
CITY, VILLAGE, OR LOCATION OF BIRTH (5b.) Columbus	INSIDE CITY LIMITS (Specify yes or no) (5c.) yes	HOSPITAL—NAME (If not in hospital, give street and number) (5d.) St. Ann's Hospital for Women		
MOTHER—MAIDEN NAME (6a.) First: Rita	Middle: Belle	Last: Brown	AGE (At time of this birth) (6b.) 24	STATE OF BIRTH (If not in U.S.A., name country) (6c.) Ohio
RESIDENCE—STATE (7a.) Ohio	COUNTY (7b.) Franklin	CITY, VILLAGE, OR LOCATION (7c.) Columbus	INSIDE CITY LIMITS (Specify yes or no) (7d.) yes	STREET AND NUMBER (7e.) 5015 Labelle Drive
FATHER—NAME (8a.) First: Gary	Middle: Lewis	Last: Love	AGE (At time of this birth) (8b.) 24	STATE OF BIRTH (If not in U.S.A., name country) (8c.) Ohio
INFORMANT'S NAME OR SIGNATURE (9a.) Gary L. Love				RELATION TO CHILD (9b.) Father
I certify that the above named child was born alive at the place and time and on the date stated above. (10a.) SIGNATURE Harley M. Blank		DATE SIGNED (10b.) 7/2/71		ATTENDANT—M.D., D.O., midwife, other (specify) (10c.) M. D.
CERTIFIER—NAME (Type or Print) (10d.) Harley M. Blank		MAILING ADDRESS (Street or R.F.D. No., City or Village, State, Zip) (10e.) 3255 E. Livingston Ave., Columbus, Ohio 43227		
REGISTRAR—SIGNATURE (11a.) L. Blanchi D. Foster			DATE RECEIVED BY LOCAL REGISTRAR (11b.) JUL 19 1971	

OHIO DEPARTMENT OF HEALTH
DIVISION OF VITAL STATISTICS
CERTIFICATE OF LIVE BIRTH

Reg. Dist. No. _____ Primary Reg. Dist. No. _____

Registrar's No. _____

Birth No. 134 - 71 - 123045

CHILD—NAME (1.) First: Deidre; Middle: Anne; Last: LOVE			DATE OF BIRTH (Month, Day, Year) (2a.) July 2, 1971	HOUR (2b.) 2:18 P.M.
SEX (3.) female	THIS BIRTH —Single, twin, triplet, etc. (Specify) (4a.) single	IF NOT SINGLE BIRTH —Born first, second, third, etc. (Specify) (4b.) --	COUNTY OF BIRTH (5a.) Franklin	
CITY, VILLAGE, OR LOCATION OF BIRTH (5b.) Columbus	INSIDE CITY LIMITS (Specify yes or no) (5c.) yes	HOSPITAL—NAME (If not in hospital, give street and number) (5d.) St. Ann's Hospital for Women		
MOTHER—MAIDEN NAME (6a.) First: Rita; Middle: Belle; Last: Brown			AGE (At time of this birth) (6b.) 24	STATE OF BIRTH (If not in U.S.A., name country) (6c.) Ohio
RESIDENCE—STATE (7a.) Ohio	COUNTY (7b.) Franklin	CITY, VILLAGE, OR LOCATION (7c.) Columbus	INSIDE CITY LIMITS (Specify yes or no) (7d.) yes	STREET AND NUMBER (7e.) 5015 Labelle Drive
FATHER—NAME (8a.) First: Gary; Middle: Lewis; Last: Love			AGE (At time of this birth) (8b.) 24	STATE OF BIRTH (If not in U.S.A., name country) (8c.) Ohio
INFORMANT'S NAME OR SIGNATURE (9a.) Gary L. Love				RELATION TO CHILD (9b.) Father
I certify that the above named child was born alive at the place and time and on the date stated above. SIGNATURE (10a.) Harley M. Blank			DATE SIGNED (10b.) 7/2/71	ATTENDANT—M.D., D.O., midwife, other (specify) (10c.) M. D.
CERTIFIER—NAME (Type or Print) (10d.) Harley M. Blank			MAILING ADDRESS (Street or R.F.D. No., City or Village, State, Zip) (10e.) 3255 E. Livingston Ave., Columbus, Ohio 43227	
REGISTRAR—SIGNATURE (11a.) L. Blanchard J. Foster				DATE RECEIVED BY LOCAL REGISTRAR (11b.) JUL 19 1971

OHIO DEPARTMENT OF HEALTH
DIVISION OF VITAL STATISTICS
CERTIFICATE OF LIVE BIRTH

Reg. Dist. No. _____
Primary Reg. Dist. No. _____

Registrar's No. _____

Birth No. 134 - 71 - 123045

1. CHILD—NAME: First: Deidre; Middle: Anne; Last: LOVE			2a. DATE OF BIRTH (Month, Day, Year): July 2, 1971	2b. HOUR: 2:18 P.M.
3. SEX: female	4a. THIS BIRTH —Single, twin, triplet, etc. (Specify): single	4b. IF NOT SINGLE BIRTH —Born first, second, third, etc. (Specify): --	5a. COUNTY OF BIRTH: Franklin	
5b. CITY, VILLAGE, OR LOCATION OF BIRTH: Columbus	5c. INSIDE CITY LIMITS (Specify yes or no): yes	5d. HOSPITAL—NAME (If not in hospital, give street and number): St. Ann's Hospital for Women		
6a. MOTHER—MAIDEN NAME: First: Rita; Middle: Belle; Last: Brown			6b. AGE (At time of this birth): 24	6c. STATE OF BIRTH (If not in U.S.A., name country): Ohio
7a. RESIDENCE—STATE: Ohio	7b. COUNTY: Franklin	7c. CITY, VILLAGE, OR LOCATION: Columbus	7d. INSIDE CITY LIMITS (Specify yes or no): yes	7e. STREET AND NUMBER: 5015 Labelle Drive
8a. FATHER—NAME: First: Gary; Middle: Lewis; Last: Love			8b. AGE (At time of this birth): 24	8c. STATE OF BIRTH (If not in U.S.A., name country): Ohio
9a. INFORMANT'S NAME OR SIGNATURE: Gary L. Love				9b. RELATION TO CHILD: Father
I certify that the above named child was born alive at the place and time and on the date stated above. 10a. SIGNATURE: Harley M. Blank			10b. DATE SIGNED: 7/2/71	10c. ATTENDANT—M.D., D.O., midwife, other (specify): M. D.
10d. CERTIFIER—NAME (Type or Print): Harley M. Blank			10e. MAILING ADDRESS (Street or R.F.D. No., City or Village, State, Zip): 3255 E. Livingston Ave., Columbus, Ohio 43227	
11a. REGISTRAR—SIGNATURE: Blanche D. Foster				11b. DATE RECEIVED BY LOCAL REGISTRAR: JUL 19 1971

OHIO DEPARTMENT OF HEALTH
DIVISION OF VITAL STATISTICS
CERTIFICATE OF LIVE BIRTH

Reg. Dist. No. _____ Primary Reg. Dist. No. _____

Registrar's No. _____

Birth No. 134 - 71 - 123045

1. CHILD—NAME: First: Deidre; Middle: Anne; Last: LOVE			2a. DATE OF BIRTH (Month, Day, Year): July 2, 1971	2b. HOUR: 2:18 P.M.
3. SEX: female	4a. THIS BIRTH (Specify): single	4b. IF NOT SINGLE BIRTH (Born first, second, third, etc. (Specify): --	5a. COUNTY OF BIRTH: Franklin	
5b. CITY, VILLAGE, OR LOCATION OF BIRTH: Columbus	5c. INSIDE CITY LIMITS (Specify yes or no): yes	5d. HOSPITAL—NAME (If not in hospital, give street and number): St. Ann's Hospital for Women		
6a. MOTHER—MAIDEN NAME: First: Rita; Middle: Belle; Last: Brown			6b. AGE (At time of this birth): 24	6c. STATE OF BIRTH (If not in U.S.A., name country): Ohio
7a. RESIDENCE—STATE: Ohio	7b. COUNTY: Franklin	7c. CITY, VILLAGE, OR LOCATION: Columbus	7d. INSIDE CITY LIMITS (Specify yes or no): yes	7e. STREET AND NUMBER: 5015 Labelle Drive
8a. FATHER—NAME: First: Gary; Middle: Lewis; Last: Love			8b. AGE (At time of this birth): 24	8c. STATE OF BIRTH (If not in U.S.A., name country): Ohio
9a. INFORMANT'S NAME OR SIGNATURE: Gary L. Love				9b. RELATION TO CHILD: Father
I certify that the above named child was born alive at the place and time and on the date stated above. 10a. SIGNATURE: Harley M. Blank			10b. DATE SIGNED: 7/2/71	10c. ATTENDANT—M.D., D.O., midwife, other (specify): M. D.
10d. CERTIFIER—NAME (Type or Print): Harley M. Blank			MAILING ADDRESS (Street or R.F.D. No., City or Village, State, Zip): 10e. 3255 E. Livingston Ave., Columbus, Ohio 43227	
11a. REGISTRAR—SIGNATURE: L. Blanche D. Foster				11b. DATE RECEIVED BY LOCAL REGISTRAR: JUL 19 1971

OHIO DEPARTMENT OF HEALTH
DIVISION OF VITAL STATISTICS
CERTIFICATE OF LIVE BIRTH

Reg. Dist. No. _____ Primary Reg. Dist. No. 1

Registrar's No. _____

Birth No. 134 - 71 - 123045

1. CHILD—NAME: First: Deidre; Middle: Anne; Last: LOVE			2a. DATE OF BIRTH (Month, Day, Year): July 2, 1971	2b. HOUR: 2:18 P.M.
3. SEX: female	4a. THIS BIRTH —Single, twin, triplet, etc. (Specify): single	4b. IF NOT SINGLE BIRTH —Born first, second, third, etc. (Specify): --	5a. COUNTY OF BIRTH: Franklin	
5b. CITY, VILLAGE, OR LOCATION OF BIRTH: Columbus	5c. INSIDE CITY LIMITS (Specify yes or no): yes	5d. HOSPITAL—NAME (If not in hospital, give street and number): St. Ann's Hospital for Women		
6a. MOTHER—MAIDEN NAME: First: Rita; Middle: Belle; Last: Brown			6b. AGE (At time of this birth): 24	6c. STATE OF BIRTH (If not in U.S.A., name country): Ohio
7a. RESIDENCE—STATE: Ohio	7b. COUNTY: Franklin	7c. CITY, VILLAGE, OR LOCATION: Columbus	7d. INSIDE CITY LIMITS (Specify yes or no): yes	7e. STREET AND NUMBER: 5015 Labelle Drive
8a. FATHER—NAME: First: Gary; Middle: Lewis; Last: Love			8b. AGE (At time of this birth): 24	8c. STATE OF BIRTH (If not in U.S.A., name country): Ohio
9a. INFORMANT'S NAME OR SIGNATURE: Gary L. Love				9b. RELATION TO CHILD: Father
I certify that the above named child was born alive at the place and time and on the date stated above. 10c. SIGNATURE: Harley M. Blank			10b. DATE SIGNED: 7/2/71	10c. ATTENDANT—M.D., D.O., midwife, other (specify): M. D.
10d. CERTIFIER—NAME (Type or Print): Harley M. Blank			10e. MAILING ADDRESS (Street or R.F.D. No., City or Village, State, Zip): 3255 E. Livingston Ave., Columbus, Ohio 43227	
11a. REGISTRAR—SIGNATURE: T. Blanche D. Foster				11b. DATE RECEIVED BY LOCAL REGISTRAR: JUL 19 1971

CERTIFICATE OF CHURCH MEMBERSHIP

RITA B. WALTENER
DEIDRE A. LOVE

you have confessed your faith in God the Father, Son and Holy Spirit. You have also promised to uphold the constitution and to participate in the life of

Christ Lutheran
NAME OF CONGREGATION

you are therefore

RECEIVED INTO MEMBERSHIP

of this congregation by transfer
BAPTISM, CONFIRMATION, TRANSFER, RESTORATION

with all the privileges and responsibilities of our fellowship.

Everett Bunck & R. M. Van Horne
MINISTER

2911 Del Prado Boulevard
ADDRESS

December 18, 1983
DATE

Cape Coral, FL 33904
CITY-STATE

©1979 SACRED DESIGN 112016

LOVE gary

LOVE gary

Individual Report for Gary Lewis Love

Individual Summary:	Gary Lewis Love
Sex:	Male
Father:	Robert S. Love
Mother:	Betty Drake

Individual Facts:	
Birth:	02 Feb 1947 in Somerset, OH
Graduation:	1965 in Sheridan High School
Graduation:	1969 in B.S. Capital University - Columbus, OH
Social Security Number:	274-46-8845
Occupation:	Math teacher Columbus Public Schools, OH
Address:	/ Lewis Center, OHio /

Shared Facts:	Rita Belle Brown
Marriage:	10 Jun 1969 in Thornville, OH
Divorce:	21 Oct 1976 in Newark, OH
Children:	Deidre Anne Love
	Brooke Elizabeth Love

Shared Facts:	Kathlee M. Stefanik
Marriage:	25 Feb 1977 in Frankin County, Ohio
Children:	[no children with Kathlee M. Stefanik]

Notes:	
Person Notes:	[no notes]

Sources:

1 [no sources]

OHIO DEPARTMENT OF HEALTH

COLUMBUS

CERTIFICATE OF LIVE BIRTH

26060

Reg. Dist. No. 1018 | Primary Reg. Dist. No. 5561 | State File No. _____ | Registrar's No. 21

1. PLACE OF BIRTH:

(a) County Perry

(b) Reading Twp. (~~City, Village,~~ Township)

(c) Name of hospital or institution: _____

(If not in hospital or institution, give street or location)

(d) Mother's stay before delivery: In hospital or institution _____ In this community 28 yrs (Specify whether years, months, or days)

2. USUAL RESIDENCE OF MOTHER:

(a) State Ohio

(b) County Perry

(c) City or village Rural (If outside city or village, write RURAL)

(d) Street No. Thornville, O. R. D. 1. (If rural, give location)

3. FULL NAME OF CHILD Gary Lewis Lowe

4. DATE OF BIRTH Feb 2 1947 (Month) (Day) (Year)

5. Sex:	6. Twin / Triplet	If so—born 1st, 2d, or 3d	7. Number months of pregnancy	7a. Weight at birth	7b. Congenital malformation	8. Is mother married?
Male			9	8 lbs	None	Yes

FATHER OF CHILD

9. Full name Robert Love

10. Color or race White 11. Age at time of this birth 28 yrs.

12. Birthplace Stanford (City, town, or county) Ohio (State or foreign country)

13. Usual occupation Farmer.

14. Industry or business

MOTHER OF CHILD

15. Full maiden name Betty Drake

16. Color or race White 17. Age at time of this birth 24 yrs.

18. Birthplace Stuebsville (City, town, or county) Ohio (State or foreign country)

19. Usual occupation Housewife

20. Industry or business

21. Children born to this mother not including this child 3

(a) How many other children of this mother are now living? 3

(b) How many other children were born alive but are now dead? 0

(c) How many children were born dead? 0

(The total of a-b-c should equal Item 21)

22. Date serologic test for syphilis Nov 22, 1946

(a) If none, give reason _____

23. Mother's usual mailing address: Thornville, O. R. D 1.

STATISTICAL USE ONLY

24. I hereby certify that I attended the birth of this child who was born alive at the hour of 12:50 A M on the date above stated and that the information given was furnished by Robert Love related to this child as Father

25. Registrar's signature James Tony Parker

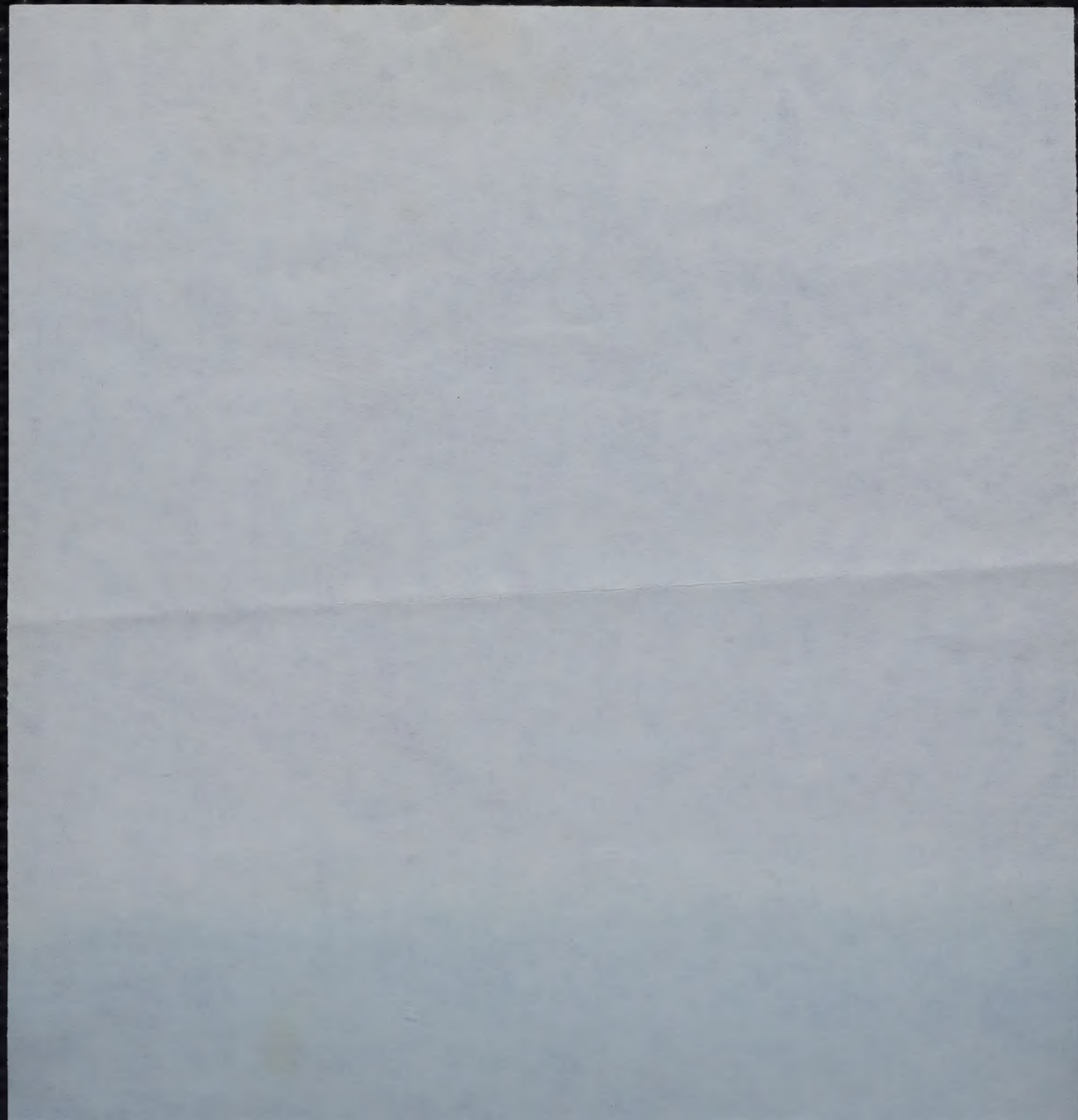
26. Date received by local registrar Feb 15-1947

Signature Joseph H. Clouse M.D (Specify if physician, licensed midwife or other)

Address Somerset, Ohio.

Date signed Feb 3, 1947.

Do not write in this space	640	"	5	



PLEASE EXCUSE THE TYPOS, MY COMPUTER SKILLS ARE LACKING.

GARY

9-30-10

OHIO DEPARTMENT OF HEALTH

COLUMBUS

CERTIFICATE OF LIVE BIRTH

26060

Reg. Dist. No. 1618 | Primary Reg. Dist. No. 5561 | State File No. ____ | Registrar's No. 31

1. PLACE OF BIRTH:

(a) County Perry

(b) Reading Twp. (~~City, Village,~~ Township)

(c) Name of hospital or institution: ____

(If not in hospital or institution, give street or location)

(d) Mother's stay before delivery: In hospital or institution ____ In this community 28 yrs

(Specify whether years, months, or days)

2. USUAL RESIDENCE OF MOTHER:

(a) State Ohio

(b) County Perry

(c) City or village Rural

(If outside city or village, write RURAL)

(d) Street No. Thornville, O. R. D 1.

(If rural, give location)

3. FULL NAME OF CHILD Gary Lewis Love

4. DATE OF BIRTH Feb 2, 1947 (Month) (Day) (Year)

5. Sex:	6. Twin / Triplet	If so—born 1st, 2d, or 3d	7. Number months of pregnancy	7a. Weight at birth	7b. Congenital malformation	8. Is mother married?
Male			9	8 lbs	None	Yes

FATHER OF CHILD

9. Full name Robert Love

10. Color or race White 11. Age at time of this birth 28 yrs.

12. Birthplace Glenford Ohio (City, town, or county) (State or foreign country)

13. Usual occupation Farmer.

14. Industry or business

MOTHER OF CHILD

15. Full maiden name Betty Drake

16. Color or race White 17. Age at time of this birth 24 yrs.

18. Birthplace Stuebsville Ohio (City, town, or county) (State or foreign country)

19. Usual occupation Housewife

20. Industry or business

21. Children born to this mother not including this child 3

(a) How many other children of this mother are now living? 3

(b) How many other children were born alive but are now dead? 0

(c) How many children were born dead? 0

(The total of a-b-c should equal Item 21)

22. Date serologic test for syphilis Jan 22, 1946

(a) If none, give reason ____

23. Mother's usual mailing address: Thornville, O. R. D 1.

24. I hereby certify that I attended the birth of this child who was born alive at the hour of 12:05 A M on the date above stated and that the information given was furnished by Robert Love related to this child as Father

25. Registrar's signature James Posey parker

26. Date received by local registrar Feb 15-1947

Signature Joseph H. Clause M.D (Specify if physician, licensed midwife or other)

Address Somerset, Ohio.

Date signed Feb 3, 1947.

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OHIO DEPARTMENT OF HEALTH

COLUMBUS

CERTIFICATE OF LIVE BIRTH

Reg. Dist. No. 1018 — Primary Reg. Dist. No. 5561 — 26060 — State File No. — Registrar's No. 31

1. PLACE OF BIRTH:
(a) County: Perry
(b) ~~(City, Village,)~~ Township: Reading Twp.
(c) Name of hospital or institution:
(If not in hospital or institution, give street or location)
(d) Mother's stay before delivery: In hospital or institution ____ In this community 28 yrs (Specify whether years, months, or days)

2. USUAL RESIDENCE OF MOTHER:
(a) State: Ohio
(b) County: Perry
(c) City or village: Rural (If outside city or village, write RURAL)
(d) Street No. Thornville, O. R. D. 1. (If rural, give location)

3. FULL NAME OF CHILD: Gary Lewis Lowe

4. DATE OF BIRTH: Feb 2 1947 (Month) (Day) (Year)

5. Sex:	6. Twin / Triplet	If so—born 1st, 2d, or 3d	7. Number months of pregnancy	7a. Weight at birth	7b. Congenital malformation	8. Is mother married?
Male			9	8 lbs	None	Yes

FATHER OF CHILD
9. Full name: Robert Lowe
10. Color or race: White — 11. Age at time of this birth: 28 yrs.
12. Birthplace: Glenford (City, town, or county) Ohio (State or foreign country)
13. Usual occupation: Farmer.
14. Industry or business:

MOTHER OF CHILD
15. Full maiden name: Betty Drake
16. Color or race: White — 17. Age at time of this birth: 24 yrs.
18. Birthplace: Stuntsville (City, town, or county) Ohio (State or foreign country)
19. Usual occupation: Housewife
20. Industry or business:

21. Children born to this mother not including this child: 3
(a) How many other children of this mother are now living? 3
(b) How many other children were born alive but are now dead? 0
(c) How many children were born dead? 0
(The total of a-b-c should equal Item 21)

22. Date serologic test for syphilis: Mar 22, 1946
(a) If none, give reason:
23. Mother's usual mailing address: Thornville, O. R. D 1.

24. I hereby certify that I attended the birth of this child who was born alive at the hour of 12:05 A M on the date above stated and that the information given was furnished by Robert Lowe related to this child as Father

25. Registrar's signature: James Honey parker
26. Date received by local registrar: Feb 4-1947

Signature: Joseph H. Clouse M.D (Specify if physician, licensed midwife or other)
Address: Somerset, Ohio.
Date signed: Feb 3, 1947.

Do not write in this space	1-48	"	1-	

OHIO DEPARTMENT OF HEALTH

COLUMBUS

CERTIFICATE OF LIVE BIRTH

26060

Reg. Dist. No. 1018 Primary Reg. Dist. No. 3561 State File No. ____ Registrar's No. 31

1. PLACE OF BIRTH:

(a) County Perry

(b) Reading Twp. (~~City, Village,~~ Township)

(c) Name of hospital or institution: ____

(If not in hospital or institution, give street or location)

(d) Mother's stay before delivery: In hospital or institution ____ In this community 28 yrs (Specify whether years, months, or days)

2. USUAL RESIDENCE OF MOTHER:

(a) State Ohio

(b) County Perry

(c) City or village Rural (If outside city or village, write RURAL)

(d) Street No. Thornville, O. R. D. 1. (If rural, give location)

3. FULL NAME OF CHILD Gary Lewis Lowe

4. DATE OF BIRTH Feb 2, 1947 (Month) (Day) (Year)

5. Sex:	6. Twin / Triplet	If so—born 1st, 2d, or 3d	7. Number months of pregnancy	7a. Weight at birth	7b. Congenital malformation	8. Is mother married?
Male			9	8 lbs.	None	Yes

FATHER OF CHILD

9. Full name Robert Lowe

10. Color or race White 11. Age at time of this birth 28 yrs.

12. Birthplace Glenford Ohio (City, town, or county) (State or foreign country)

13. Usual occupation Farmer.

14. Industry or business

MOTHER OF CHILD

15. Full maiden name Betty Drake

16. Color or race White 17. Age at time of this birth 24 yrs

18. Birthplace Steubenville Ohio (City, town, or county) (State or foreign country)

19. Usual occupation Housewife

20. Industry or business

21. Children born to this mother not including this child 3

(a) How many other children of this mother are now living? 3

(b) How many other children were born alive but are now dead? 0

(c) How many children were born dead? 0

(The total of a-b-c should equal Item 21)

22. Date serologic test for syphilis Nov 22, 1946

(a) If none, give reason ____

23. Mother's usual mailing address: Thornville, O. R. D. 1.

24. I hereby certify that I attended the birth of this child who was born alive at the hour of 12:05 A M on the date above stated and that the information given was furnished by Robert Lowe related to this child as Father

25. Registrar's signature James Lowry Parker

26. Date received by local registrar Feb 18-1947

Signature Joseph H. Clause M.D (Specify if physician, licensed midwife or other)

Address Somerset, Ohio.

Date signed Feb 3 1947.

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Center for the Teaching Profession

Educator Profile

Educator Search | Demographic Information | Application Status | Credentials | Documents | Assignment Data | BCI

Educator: Love, Gary L. (2/2/1947) State ID: OS1011942

Credential History

Sort By: Issue Date (Descending) Per Pa

Credential

Credential: 3 Year Pupil Activity Supervisor Permit - N/A **Status:** Expired
Effective Year: 1999 **Issue Date:** 10/01/1999
Effective Date: 07/01/1999 **Expiration Date:** 06/30/2002

Credential: 4 Year Provisional Certificate - School Counselor **Status:** Expired
Effective Year: 1986 **Issue Date:** 03/17/1986
Effective Date: 07/01/1986 **Expiration Date:** 06/30/1990

Credential: Permanent Permanent Certificate - High School (7-12) **Status:** Issued
Effective Year: 1985 **Issue Date:** 11/04/1985
Effective Date: 07/01/1985 **Expiration Date:** Not Applicable
Teaching Fields:
Mathematics (110000) **Issue Date:** 11/04/1985
Physical Education (080310) **Issue Date:** 11/04/1985
Health (080101) **Issue Date:** 11/04/1985

Credential: 4 Year Provisional Certificate - School Counselor **Status:** Expired
Effective Year: 1982 **Issue Date:** 08/04/1982
Effective Date: 07/01/1982 **Expiration Date:** 06/30/1986

Credential: 8 Year Professional Certificate - High School (7-12) **Status:** Expired
Effective Year: 1980 **Issue Date:** 11/11/1980
Effective Date: 07/01/1980 **Expiration Date:** 06/30/1988
Teaching Fields:
Health Education* * (080100) **Issue Date:** 11/11/1980
Mathematics (110000) **Issue Date:** 11/11/1980
Physical Education* (080300) **Issue Date:** 11/11/1980

Credential: 4 Year Provisional Certificate - High School (7-12) **Status:** Expired
Effective Year: 1977 **Issue Date:** 02/07/1977
Effective Date: 07/01/1977 **Expiration Date:** 06/30/1981
Teaching Fields:
Mathematics (110000) **Issue Date:** 02/07/1977
Health Education* * (080100) **Issue Date:** 02/07/1977
Physical Education* (080300) **Issue Date:** 02/07/1977

Credential: 4 Year Provisional Certificate - High School (7-12) **Status:** Expired

Effective Year: 1973 **Issue Date:** 03/16/1973
Effective Date: 07/01/1973 **Expiration Date:** 06/30/1977
Teaching Fields:
Health Education* * (080100) **Issue Date:** 03/16/1973
Mathematics (110000) **Issue Date:** 03/16/1973
Physical Education* (080300) **Issue Date:** 03/16/1973

Credential: 4 Year Provisional Certificate - High School (7-12) **Status:** Expired
Effective Year: 1969 **Issue Date:** 04/30/1969
Effective Date: 07/01/1969 **Expiration Date:** 06/30/1973
Teaching Fields:
Mathematics (110000) **Issue Date:** 04/30/1969
Health Education* * (080100) **Issue Date:** 04/30/1969
Physical Education* (080300) **Issue Date:** 04/30/1969

Sort By: Issue Date (Descending) Per Pa

Statuses

Issued	The Credential is currently active.
Suspended	The credential has been suspended. Please contact the Office of Professional Conduct at 614-466
Voided	The credential is not valid.
Relinquished	The credential has been relinquished at the request of the credential holder.
Expired	The credential has reached the end of its validity period and is no longer active.
Revoked OPC	The credential has been revoked. Please contact the Office of Professional Conduct at 614-466-5(

Connected Ohio Records for Educators (CORE) - Copyright (c) ODE 2006-2007

OHIO DEPARTMENT OF HEALTH

COLUMBUS

CERTIFICATE OF LIVE BIRTH

Reg. Dist. No. 1018 — Primary Reg. Dist. No. 5561 — State File No. 26060 — Registrar's No. 31

1. PLACE OF BIRTH:
(a) County: Perry
(b) ~~(City, Village,)~~ Township: Reading Twp.
(c) Name of hospital or institution:
(If not in hospital or institution, give street or location)
(d) Mother's stay before delivery: In hospital or institution ____ In this community 28 yrs
(Specify whether years, months, or days)

2. USUAL RESIDENCE OF MOTHER:
(a) State: Ohio
(b) County: Perry
(c) City or village: Rural
(If outside city or village, write RURAL)
(d) Street No. Thornville, O. R. D. 1.
(If rural, give location)

3. FULL NAME OF CHILD: Gary Lewis Lowe

4. DATE OF BIRTH: Feb 2, 1947 (Month) (Day) (Year)

5. Sex:	6. Twin / Triplet	If so—born 1st, 2d, or 3d	7. Number months of pregnancy	7a. Weight at birth	7b. Congenital malformation	8. Is mother married?
Male			9	8 lbs	None	Yes

FATHER OF CHILD

9. Full name: Robert Lowe
10. Color or race: White — 11. Age at time of this birth: 28 yrs.
12. Birthplace: Stanford (City, town, or county) Ohio (State or foreign country)
13. Usual occupation: Farmer.
14. Industry or business:

MOTHER OF CHILD

15. Full maiden name: Betty Drake
16. Color or race: White — 17. Age at time of this birth: 24 yrs.
18. Birthplace: Stoutsville (City, town, or county) Ohio (State or foreign country)
19. Usual occupation: Housewife
20. Industry or business:

21. Children born to this mother not including this child: 3
(a) How many other children of this mother are now living? 3
(b) How many other children were born alive but are now dead? 0
(c) How many children were born dead? 0
(The total of a-b-c should equal Item 21)

22. Date serologic test for syphilis: Mar 22, 1946
(a) If none, give reason:
23. Mother's usual mailing address: Thornville, O. R. D. 1.

24. I hereby certify that I attended the birth of this child who was born alive at the hour of 12:05 A M on the date above stated and that the information given was furnished by Robert Lowe related to this child as Father

25. Registrar's signature: Emma Lowry Parker
26. Date received by local registrar: Feb 10-1947

Do not write in this space: 648 | " | 5

Signature: Joseph H. Clouse M.D
(Specify if physician, licensed midwife or other)
Address: Somerset, Ohio.
Date signed: Feb 3 1947.

ancestry

Children (0)

Gary Lewis LOVE

B: 02 Feb 1947 in Perry County, Oho, USA
D:

kaye m. STEFANIK **B:**

Other spouses (2)

Parents

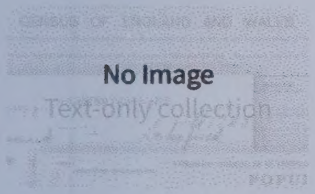
robert snider LOVE
1918-2007

betty harriet DRAKE
1922-1989

Ohio, Divorce Abstracts, 1962-1963, 1967-1971, 1973-2007

Does the Gary L Love in this record match the person in your tree?

Yes | No | Maybe



Add alternate information

Report issue

Name:	Gary L Love
Residence:	Licking
Spouse's Name:	Rita B Love
Spouse's Residence:	Licking
Marriage Duration (Years):	09
Number of Minor Children:	2
To Whom Decree Granted:	Dissolution
County of Decree:	Licking
Decree Date:	21 Oct 1976
Cerificate Number:	45692
Volume Number:	3439

Does the Gary L Love in this record match the person in your tree?

Yes | No | Maybe

Suggested Records

- U.S. Public Records Index, 1950-1993, Volume 1
  Gary L Love
- U.S. Public Records Index, 1950-1993, Volume 1
  Gary L Love
- U.S. Public Records Index, 1950-1993, Volume 1
  Gary L Love
- U.S. Public Records Index, 1950-1993, Volume 1
  Gary L Love
- U.S. Public Records Index, 1950-1993, Volume 1
  Gary L Love
- U.S. Public Records Index, 1950-1993, Volume 1
  Gary L Love

Show More

Source Citation

Ohio Department of Health; Columbus, Ohio; *Ohio Divorce Index, 1962-1963, 1967-1971 and 1973-2007*

Source Information

Ancestry.com. *Ohio, Divorce Abstracts, 1962-1963, 1967-1971, 1973-2007* [database on-line]. Provo, UT: Ancestry.com Operations, Inc, 2010.

Original data: *Ohio Divorce Index, 1962-1963, 1967-1971, 1973-2007*. Columbus, Ohio: Ohio Department of Health, Office of Vital Statistics, 2008.

Description

Write a comment.

Make a Connection

Find others who are researching

This database contains abstracts of divorce records for the state of Ohio. Beginning in 1962 and extending to 2007, this collection has information regarding the parties involved, and can provide information needed to request copies of divorce decrees, which are available through individual county courts in Ohio. While this collection contains a wide range of years, unfortunately, 1964,1965,1966 and 1972 are missing, as abstracts for these years are not available from the Ohio Office of Vital Statistics. Learn more...

Gary L Love in Public Member Trees

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Rita and Gary Love

OHIO DEPARTMENT OF HEALTH

COLUMBUS

CERTIFICATE OF LIVE BIRTH

26060

Reg. Dist. No. 1018 | Primary Reg. Dist. No. 3561 | State File No. | Registrar's No. 31

1. PLACE OF BIRTH:

(a) County Perry

(b) Reading Twp. (~~City, Village,~~ Township)

(c) Name of hospital or institution:

(If not in hospital or institution, give street or location)

(d) Mother's stay before delivery: In hospital or institution ____ In this community 28 yrs (Specify whether years, months, or days)

2. USUAL RESIDENCE OF MOTHER:

(a) State Ohio

(b) County Perry

(c) City or village Rural (If outside city or village, write RURAL)

(d) Street No. Thornville, O. R. D 1. (If rural, give location)

3. FULL NAME OF CHILD Gary Lewis Lowe

4. DATE OF BIRTH Feb 2, 1947 (Month) (Day) (Year)

5. Sex:	6. Twin / Triplet	If so—born 1st, 2d, or 3d	7. Number months of pregnancy	7a. Weight at birth	7b. Congenital malformation	8. Is mother married?
Male			9	8 lbs.	None	Yes

FATHER OF CHILD

9. Full name Robert Lowe

10. Color or race White 11. Age at time of this birth 28 yrs.

12. Birthplace Stanford Ohio (City, town, or county) (State or foreign country)

13. Usual occupation Farmer.

14. Industry or business

MOTHER OF CHILD

15. Full maiden name Betty Drake

16. Color or race White 17. Age at time of this birth 24 yrs.

18. Birthplace Steubenville Ohio (City, town, or county) (State or foreign country)

19. Usual occupation Housewife

20. Industry or business

21. Children born to this mother not including this child 3

(a) How many other children of this mother are now living? 3

(b) How many other children were born alive but are now dead? 0

(c) How many children were born dead? 0

(The total of a-b-c should equal Item 21)

22. Date serologic test for syphilis Nov 22, 1946

(a) If none, give reason

23. Mother's usual mailing address: Thornville, O. R. D 1.

24. I hereby certify that I attended the birth of this child who was born alive at the hour of 12:05 A M on the date above stated and that the information given was furnished by Robert Lowe related to this child as Father

25. Registrar's signature James Honeymaker

26. Date received by local registrar Feb 13-1947

Signature Joseph H. Clause M.D (Specify if physician, licensed midwife or other)

Address Somerset, Ohio.

Date signed Feb 3, 1947.

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	1-48	"	1-	

ancestry.com

Ohio Marriage Index, 1970, 1972-2007

Name:	**Gary L Love**
Age:	30
Times Married:	1
Spouse's Name:	Kathlee M Stefanik
Spouse's Age:	32
Spouse's Residence County:	Franklin
Spouse - Times Married:	1
Marriage Date:	25 Feb 1977
Marriage License County:	Franklin
Cerificate Number:	11080
Volume Number:	8918

Source Citation: Ohio Department of Health; Columbus, Ohio; Ohio Marriage Index, 1970 and 1972-2007

Source Information:
Ancestry.com. *Ohio Marriage Index, 1970, 1972-2007* [database on-line]. Provo, UT: Ancestry.com Operations, Inc, 2010. Original data: *Ohio Marriage Index, 1970 and 1972-2007*. Columbus, Ohio: Ohio Department of Health, Office of Vital Statistics, 2008.

Description:
This database contains more than 3 million marriages in Ohio between 1970 and 2007. The records from 1971 aren't included because they aren't available from the Ohio Office of Vital Statistics. This is a collection of abstracts that were created with limited information for filing purposes. The information can then be used to find the marriage certificates at the individual county probate courts. The records contain the name of bride/groom, birth year, county of residence, county of license and marriage date.

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ancestry.com

1930 United States Federal Census

Name:	**Robert S Love**
Home in 1930:	Reading, Perry, Ohio
Age:	12
Estimated Birth Year:	abt 1918
Relation to Head of House:	Son
Father's Name:	John Love
Mother's Name:	Effie J Love
Race:	White

Household Members:	Name	Age
	John Love	51
	Effie J Love	51
	James L Love	27
	Robert S Love	12
	Cedora L Sinder	71

Source Citation: Year: *1930*; Census Place: *Reading, Perry, Ohio*; Roll: *1861*; Page: *2B*; Enumeration District: *25*; Image: *336.0*.

Source Information:
Ancestry.com. *1930 United States Federal Census* [database on-line]. Provo, UT, USA: Ancestry.com Operations Inc, 2002. Original data: United States of America, Bureau of the Census. *Fifteenth Census of the United States, 1930*. Washington, D.C.: National Archives and Records Administration, 1930. T626, 2,667 rolls.

Description:
Containing records for approximately 123 million Americans, the 1930 United States Federal Census is the largest census released to date and is the most recent census available for public access. The census gives us a glimpse into the lives of Americans in 1930, and contains information about a household's family members and occupants including: birthplaces, occupations, immigration, citizenship, and military service. The names of those listed in the census are linked to actual images of the 1930 Census.

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ancestry.com

Social Security Death Index

Name:	**Robert S. Love**
SSN:	290-12-3703
Last Residence:	43055 Newark, Licking, Ohio, United States of America
Born:	13 Feb 1918
Died:	8 Jun 2007
State (Year) SSN issued:	Ohio (Before 1951)

Source Citation: Number: *290-12-3703*;Issue State: *Ohio*;Issue Date: *Before 1951.*

Source Information:
Ancestry.com. *Social Security Death Index* [database on-line]. Provo, UT, USA: Ancestry.com Operations Inc, 2010.
Original data: Social Security Administration. *Social Security Death Index, Master File*. Social Security Administration.

Description:
The Social Security Administration Death Master File contains information on millions of deceased individuals with United States social security numbers whose deaths were reported to the Social Security Administration. Birth years for the individuals listed range from 1875 to last year. Information in these records includes name, birth date, death date, and last known residence.

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Times Recorder (Zanesville, OH) - *June 10, 2007*

Deceased Name: NEWARK -- Robert S. Love

NEWARK -- Robert S. Love, 89, of Newark, formerly of Zanesville, entered eternal life on Friday, June 8, 2007. Born Feb. 13, 1918, he was the son of the late John and Effie J. (Snider) Love.

Robert was a member of Olivet Church of the Brethren in Thornville, SETOMA in Hebron, Freedom Years at Park National Bank in Newark, Thornville Village Council and USWU. Robert loved his family and playing cards.

Survivors include his wife, Edna L. (Wade) Love; daughters, Sheri (Gary) Derr of Angola, Ind., and Kathy S. Love of Glenmont; his sons, Robert D. (Cindy) Love of Thornville, John C. (Annie) Love of Thornville, William M. (Joan) Love of Pataskala and Gary L. (Kathleen) Love of Lewis Center; 21 grandchildren; numerous great-grandchildren and great-great grandchildren; and stepson, Kenneth Andrew.

He was preceded in death by his parents; his first wife of 50 years, Betty (Drake) Love; his brother, Lawrence Love; an infant son; a daughter-in-law, Charleen Kay; and granddaughters, Lisa (Love) Stimmel and Katlin McKenna.

Calling hours will be held from 2 to 4 and 7 to 9 p.m. today, June 10, one hour prior to services on Monday, at the Boring-Sheridan Funeral Home, 56 S. Main St. in Thornville.

Funeral services are 2 p.m. Monday, June 11, 2007, at the funeral home with Pastor David Helser officiating.

Burial will be in the Somerset Cemetery.

Donations may be given to Alzheimer's Association or charity of choice.

Online condolences may be sent to boringsheridanfuneralhomes.com.

Times Recorder (Zanesville, OH)
Date: June 10, 2007
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Advocate, The (Newark, OH) *- June 9, 2007*

Deceased Name: Obituary: Robert S. Love Feb. 13, 1918 - June 8, 2007

Funeral services for Robert S. Love, 89, of Newark, will be at 2 p.m. Monday at Boring-Sheridan Funeral Home, 56 S. Main St., Thornville, with Rev. David Helser officiating. Burial will be at the Somerset Cemetery in Somerset.

Robert, formerly of Thornville, entered eternal Life, on Friday, June 8, 2007. He was born Feb. 13, 1918, the son of the late John and Effie J. (Snider) Love.

He was a member of Olivet Church of the Brethren, Thornville; SETOMA, of Hebron; Freedom Years at Park National Bank, Newark; was a member of Thornville Village Council, and USWU. Robert loved his family and playing cards.

Survivors include: wife, Edna L. (Wade) Love; daughters: Sheri (Gary) Derr, of Angola, Ind., and Kathy S. Love, of Glenmont; sons: Robert D. (Cindy) Love, of Thornville, John C. (Annie) Love, of Thornville, William M. (Joan) Love, of Pataskala, and Gary L. (Kathleen) Love, of Lewis Center; 21 grandchildren; numerous great grandchildren and great-great grandchildren and stepson Kenneth Andrew.

He was preceded in death by his parents, first wife of 50 years, Betty (Drake) Love, brother Lawrence Love, an infant son, daughter-in-law Charleen Kay and granddaughters Lisa (Love) Stimmel and Katlin McKenna.

Visitation will be from 2 to 4 p.m. and 7 to 9 p.m. Sunday and 1 to 2 p.m. Monday at the funeral home.

Donations may be given to Alzheimers Association or charity of choice. Condolences online to boringsheridanfuneralhomes.com.

Advocate, The (Newark, OH)
Date: June 9, 2007
Record Number: -09-2007/apps/pbcs.dll/article_AID_/20070609/OBITUARIES/70609009/1023/index.html
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ObitsArchive.com

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Misch Abigail

Misch Abigail

ancestry

abigail kaye MISCH

BIRTH 15 SEP • Michigan, United States
DEATH Living
granddaughter

Facts

Age 0 — **Birth**
15 Sep • Michigan, United States

Family

Parents

scott monroe MISCH 1963–

Deidre Anne LOVE 1971–

Spouse

Sources

Abbie
16 mos.

02 194275 86602 01

Misch Michael

Misch Michael

ancestry

michael lewis monroe MISCH

BIRTH 15 DEC • Cape Coral, Lee, Florida, USA
DEATH Living
grandson

Facts

Age 0 — **Birth**
15 Dec • Cape Coral, Lee, Florida, USA
Birth

Graduation
03 Jun 2011 • Lewis Center, Delaware, Ohio, USA
Olentangy High School

Education
2011 • Columbus, Franklin, Ohio, United States
Mount Carmel School of Nursing

Family

Parents

scott monroe MISCH 1963–

Deidre Anne LOVE 1971–

Spouse

Sources

Misch Scott

Misch Scott

ancestry

Scott Monroe MISCH

BIRTH 19 SEP 1963 • Michigan, USA
DEATH Living
son-in-law

Facts

Age 0 — **Birth**
19 Sep 1963 • Michigan, USA

Age 21 — **Residence**
1984 • North Fort Myers, FL

Age 25 — **Divorce**
1 Mar 1989 • Lee, Florida, USA
Debbie

Age 26 — **Marriage**
21 Oct 1989 • Sanibel Island, Florida, USA
Deidre Anne LOVE (1971–)

Age 26 — **Marriage**
21 Oct 1989 • Sanibel Island, Florida, USA
Deidre Anne LOVE (1971–)

Age 27 — **Marriage**
11 Oct 1990 • Sanibel Island, Florida, USA (2 Media)
Beach ceremony
Deidre Anne LOVE (1971–)

Age 31 — **Residence**
1994-1995 • Fort Myers, Florida, USA

Family

Parents

Spouse & Children

Deidre Anne LOVE 1971–

Michael Lewis Monroe MISCH

Abigail Kaye MISCH

Spouse

Debbie

Spouse & Children

Daniel Misch

Sources

Ancestry Sources

1920 United States Federal Census

Florida Marriage Indexes, 1822-1875 and 1927-2001

Florida, Divorce Index, 1927-2001

U.S. Phone and Address Directories, 1993-2002

U.S. Public Records Index, 1950-1993, Volume 1